

Col. JSD

230 Flourtown Road  
Plymouth Meeting, PA 19462  
Phone: 610-834-1670

**INDIVIDUALIZED EDUCATION PROGRAM (IEP)**

\*\*\*\*\*School Age

IEP Team Meeting Date: 3/8/2007

IEP Implementation Date: 3/14/2007

Anticipated Duration of Services and Programs: 3/7/2008

Student's Name: E D DOB: Age: 5 Grade: Kindergarten

Anticipated Year of Graduation: 2018 Local Education Agency: Colonial

School the student is attending: Plymouth Elementary

Parent Name: County of Residence: Montgomery

Address: Phone: (H)  
(W)

Other Information:

The LEA and parent have agreed to make the following changes to the IEP without convening an IEP meeting, as documented by:

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2 of 18**IEP TEAM/SIGNATURES**

The Individualized Education Program (IEP) Team makes the decisions about the student's program and placement. The student's parent(s), the student's special education teacher, and a representative from the local education agency are required members of this team. A regular education teacher must also be included if the student participates, or may be participating in the regular education environment. Signature on this IEP documents attendance, not agreement.

Role	Printed Name	Signature
Parent		
Parent		
Regular Education Teacher	Tricia Kelley	<i>Tricia Kelley</i>
Local Ed Agency Rep	Heather DiRienzo	<i>Heather DiRienzo</i>
Speech and Language Therapist	Susan Dryburgh	<i>Susan Dryburgh</i>

Written input received from the following members:

- \* The IEP team must invite the student if transition services are being planned or if the parents choose to have the student participate.
- \*\* As determined by the LEA as needed for transition services.

**PROCEDURAL SAFEGUARDS NOTICE**

I have received a copy of the Procedural Safeguards Notice during this school year. The Local Education Agency has informed me whom I may contact if I need more information.

\* Signature: *Jana Dunning*

**I. SPECIAL CONSIDERATIONS THE IEP TEAM MUST CONSIDER BEFORE DEVELOPING THE IEP. ANY FACTORS CHECKED MUST BE ADDRESSED IN THE IEP.**

**Is the Student Blind or Visually Impaired?**

- ☒ No
- ☐ Yes - Team must provide for instruction in Braille and the use of Braille unless the IEP Team determines, after an evaluation of the child's reading and writing skills, needs and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or the use of Braille), that instruction in Braille or the use of Braille is not appropriate.

**Is the Student Deaf or Hearing Impaired?**

- ☒ No
- ☐ Yes - Team must consider the child's language and communication needs, opportunities for direct communications with peers and professional personnel in the child's language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child's language and communication mode in the development of the IEP.

**Other Special Considerations:**

- ☒ Communication needs
- ☐ Assistive technology devices and /or services
- ☐ Limited English Proficiency
- ☐ Behaviors that impede his/her learning or that of others
- ☐ Transition services
- ☐ Other (specify)

Description for ALL others:

Receptive and expressive language

**STUDENT'S PRESENT LEVELS OF ACADEMIC ACHIEVEMENT:**

E. was referred for a speech and language evaluation due to concerns about her academic progress. Two measures of receptive and expressive language ability were administered to Elizabeth on February 12, 2007. E. 's score on the Clinical Evaluation of Language Fundamentals-Preschool were below average for a child her age. Her strength was in being able to label pictures. E. had difficulty understanding concepts related to time and sequence. She made errors in following directions containing more than two elements. On the Test of Narrative Language, Elizabeth was unable to identify the problem in a story that was recad to her. She was not able to create stories from pictures, and she had difficulty recalling information from stories. Several grammatical errors were noted in E. 's speech including omission of grammatical morphemes at the ends of woras. E. 's most recent report card indicates that she is proficient in reading. Her scores in math placed her at basic or below basic for most skills, although she is proficient in representing numbers to 20. On the DIBELS assessment administered in January, 2007, E. was at benchmark for Letter Naming Fluency. Her scores placed her in the "emerging" range for Initial Sound Fluency and in the "at risk" range for Phoneme Segmentaiton Fluency and Nonsense Word Fluency.

**STUDENT'S PRESENT LEVELS OF FUNCTIONAL PERFORMANCE:**

Elizabeth's functional performance appears to be age-appropriate.

**HOW THE STUDENT'S DISABILITY AFFECTS INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM**

**Strengths:**

Ability to label pictures

**Academic, Developmental, Functional Needs Related To Child's Disability:**

Improved ability to follow directions  
Improved comprehension of time concepts  
Improved ability to retell stories  
Improve comprehension of stories

**Effect on Involvement and Progress In General Education Curriculum:**

E. 's receptive and expressive language needs impact her perforamnce in her classroom. She has difficulty following directions given to the group. Her difficulty in recalling information in stories affects her ability to participate in

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III. PARTICIPATION IN STATE AND LOCAL ASSESSMENTS

**STUDENT PARTICIPATION – STATE ASSESSMENTS**

**This section applies to a student participating in the Pennsylvania System of State Assessment (PSSA)  
or Pennsylvania Alternate System of Assessment (PASA)**

- ☒ Student will participate in the PSSA without accommodations.
- OR
- ☐ Student will participate in the PSSA with the following appropriate accommodations that are necessary to measure his/her academic achievement and functional performance
- Reading (Grades 3-8, and 11):
  - Math (Grades 3-8, and 11):
  - Writing (Grades 5, 8, and 11):
  - Science (Grades 4, 8, and 11):
- Science Accomodations where added to the electronic IEP on 2/1/2008, after this IEPs implementation date of 3/14/2007

OR

- ☐ Student will participate in the PASA
- Choose how the student's performance on the PASA will be documented
- ☐ Videotape (which will be kept confidential as all other school records)
  - ☐ Written narrative (which will be kept confidential as all other school records)
- Explain why the child cannot participate in the PSSA:
- Explain why the PASA is appropriate:

**STUDENT PARTICIPATION – LOCAL ASSESSMENTS**

- ☒ Student will participate in Local assessments without accommodations.
- OR
- ☐ Student will participate in Local assessments with the following accommodations:

OR

- ☐ The student will take an alternate local assessment
- Explain why the child cannot participate in the regular assessment:
- Explain why the alternate assessment is appropriate:

OR

- ☐ N/A Student does not participate in local assessments

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**V. GOALS AND OBJECTIVES including academic and functional goals:***(Use as many copies of this page as needed to plan appropriately. Specially designed instruction may be listed with each goal/objective and/or listed in Section VI.)*

MEASURABLE ANNUAL GOAL	Describe HOW the child's progress toward meeting this goal will be measured	Indicate WHEN periodic report on progress will be provided to parents	Goal Value	Report of Progress
E will follow three step directions to demonstrate comprehension of basic concepts related to time and sequence in 80% of trials in the academic environment over three observations.	Data collected by frequency count	At district report card periods	80	Not assessed this marking period

**SHORT TERM OBJECTIVES - Required for children with disabilities who take alternate assessments aligned to alternate achievement standards (PASA)**

Short term objectives / benchmarks

MEASURABLE ANNUAL GOAL	Describe HOW the child's progress toward meeting this goal will be measured	Indicate WHEN periodic report on progress will be provided to parents	Goal Value	Report of Progress
E will relate a personal experience with a topic sentence and at least two details 90% of the time over five observations in the academic environment.	Data collected by frequency count	At district report card periods	90	E! can relate a personal experience with a topic sentence. She sometimes adds details, but usually needs to be prompted to give more details.

**SHORT TERM OBJECTIVES - Required for children with disabilities who take alternate assessments aligned to alternate achievement standards (PASA)**

Short term objectives / benchmarks

MEASURABLE ANNUAL GOAL	Describe HOW the child's progress toward meeting this goal will be measured	Indicate WHEN periodic reports on progress will be provided to parents	Goal Value	Report of Progress
E. will retell a story from memory giving a beginning, middle and end with at least two supporting details 80% of the time over five observations in the academic environment.	Data collected by frequency count	At district report card periods	80	E. is able to answer factual questions about short stories with up to 60% accuracy. She is able to retell the beginning of a story from pictures, but cannot yet retell the entire story independently.

**SHORT TERM OBJECTIVES - Required for children with disabilities who take alternate assessments aligned to alternate achievement standards (PASA)**

Short term objectives / benchmarks

MEASURABLE ANNUAL GOAL	Describe HOW the child's progress toward meeting this goal will be measured	Indicate WHEN periodic reports on progress will be provided to parents	Goal Value	Report of Progress
E. will use grammatical morphemes (-s, -ed) correctly 90% of the time in spontaneous speech over five observations in the academic environment.	Data collected by frequency count	At district report card periods	90	E. is beginning to use grammatical morphemes spontaneously. She consistently imitates the correct form when given a model.

**SHORT TERM OBJECTIVES - Required for children with disabilities who take alternate assessments aligned to alternate achievement standards (PASA)**

Short term objectives / benchmarks

**A. PROGRAM MODIFICATIONS AND SPECIALLY DESIGNED INSTRUCTION**

<i>Modifications and SDI</i>	<i>Location</i>	<i>Frequency</i>	<i>Projected Beginning Date</i>	<i>Anticipated Duration</i>
Small group instruction	Plymouth Elementary	6 times per month; 30 minutes per session	3/14/2007	3/7/2008
Use of graphic organizers to give visual cues to support story retelling	All settings	Daily, as needed	3/14/2007	3/7/2008
Directions broken into smaller steps	All settings	Daily, as needed	3/14/2007	3/7/2008
Directions repeated	All settings	Daily, as needed	3/14/2007	3/7/2008
Verbal praise and reinforcement for use of correct grammatical structures	All settings	Daily, as needed	3/14/2007	3/7/2008

**B. RELATED SERVICES**

<i>Service</i>	<i>Location</i>	<i>Frequency</i>	<i>Projected Beginning Date</i>	<i>Anticipated Duration</i>
Not Applicable				

**C. SUPPORTS FOR SCHOOL PERSONNEL PROVIDED FOR THE CHILD**

<i>Service</i>	<i>Location</i>	<i>Frequency</i>	<i>Projected Beginning Date</i>	<i>Anticipated Duration</i>
Collaboration between classroom teacher and speech therapist	Plymouth Elementary	One time per month	3/14/2007	3/7/2008

**D. EXTENDED SCHOOL YEAR - The IEP Team has considered and discussed ESY services, and determined that:**

☒ Student is NOT eligible for ESY based on:

E. is a student who is being newly enrolled in speech and language support services. Data will be collected before and after breaks in programming to determine her eligibility for extended school year services at a later date.

OR

☐ Student IS eligible for ESY based on:

If the IEP Team has determined ESY is necessary for the provision of FAPE, complete the following. The Annual Goals and, when appropriate, Short Term Objectives from this IEP that are to be addressed in the child's ESY Program are:

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<i>Service</i>	<i>Location</i>	<i>Frequency</i>	<i>Projected Beginning Date</i>	<i>Anticipated Duration</i>
Not Applicable				

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VII. EDUCATIONAL PLACEMENT

A. Type of Service (i.e., itinerant, resource, part-time, full-time):  
Itinerant

B. Type of Support (e.g., learning support, life skills support):  
Speech and Language Support

Elizabeth will receive speech and language support services six times per month for 30 minutes per session.

C. Location of child's program

Will the child be attending his/her neighborhood school? (i.e., the school the child would attend if he/she did not have an IEP)

☒ Yes

☐ No. If answer is "no", select the reason why not:

☐ Special education supports and services required in the child's IEP cannot be provided in the neighborhood school

☐ Other. Please explain:

The following questions are to be considered and reviewed by a student's IEP team in determining the explanation of the extent, if any, a student will not participate with non-disabled children in the regular education class and in the general education classroom.

What supplementary aids and services were considered?

What supplementary aids and services were rejected?

Explain why the supplementary aids and services will or will not enable the student to make progress on the goals and objectives (if applicable) in this IEP in the general education class.

What benefits are provided in the regular education class with supplementary aids and services versus the benefits provided in the special education class?

What potentially beneficial effects and/or harmful effects might be expected on the student with disabilities or the other students in the class, even with supplementary aids and services?

To what extent, if any, will the student participate with non-disabled peers in extracurricular activities or other nonacademic activities?

Explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular class:

E will participate in all regular education programs and activities except when in speech and language support.

Explanation of the extent, if any, to which the child will not participate with non-disabled children in the general education curriculum:

E will participate in all regular education programs and activities except when in speech and language support.

Individualized Education Program (IEP) -

**Colonial School District**  
**230 Flourtown Road**  
**Plymouth Meeting, PA 19462**

**PERMISSION TO EVALUATE**

\*\*\*\*\* School Age

Date: 3/30/07

Student's Name: E D

Name and Address of Parent/Guardian:

Dear Mr. and Mrs. D.

Your child has been referred for evaluation for the following reason(s):

To determine E's academic strengths and needs, as well as eligibility and need for specially designed instruction.

We request your consent to conduct an evaluation of your child. We must have your consent before we can begin. Giving your consent for evaluation does not mean you give consent to special education placement or services. In the evaluation, we will review your child's educational needs and strengths (as shown by academic achievement, functional performance, a review of existing data, current classroom-room based observations and evaluations, local and state assessments, and information from you). Specific types of assessment tools, tests and procedures that will be used in the evaluation include the following:

Review of Records, Observations, Behavior Rating Scales, Review of Classroom Academic Data, Cognitive Assessment, Academic Assessment

A multidisciplinary team will conduct the evaluation. As parent(s), you are a member of the team. If a team meeting is held you will be invited. Information from you is to be considered by the team as part of the evaluation process. If you want to send written comments, please do so. You are entitled to participate in any meetings with respect to the identification and evaluation of your child.

The multidisciplinary team must determine whether your child is a child with a disability and will prepare recommendations regarding your child's educational program, and whether your child is in need of, and is eligible for special education and related services. This information will be outlined in an Evaluation Report (ER). If your child is in need of special education, you will be invited to participate in developing an IEP. The ER is to be completed and a copy of the ER is to be presented to you no later than 60 school days (60 calendar days for charter schools) after we have received your written permission for the evaluation.

The evaluation is proposed for the following date(s):

Within 60 school days of receipt of signed parent permission

Please read the enclosed **Procedural Safeguards Notice\*** that includes parent resources such as state or local advocacy organizations. If you have any questions, or if you need the services of an interpreter, please contact me.

Heather DiRienzo

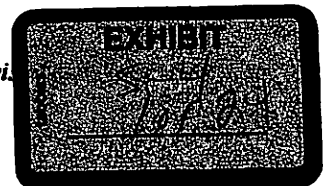
School Counselor

(610) 825- 8190 X 6009

Position

Phone

PDE Rev.



**PARENT INPUT FORM FOR MULTIDISCIPLINARY EVALUATION**

STUDENT NAME: E D

DOB: 5/5/07

SCHOOL: PES

TEACHER: Tricia Kelley

1. Reason for evaluation / Areas of concern:

lack of progression compared to children her  
age difficulty concentrating

2. Please comment on your child's strengths in the following areas:

Academic: has come a long way since September, is  
able to write her name & read some sight words.  
Knows her numbers

Social/Behavioral: enjoys being in the classroom and  
loves to learn in that setting.

3. Please comment on your child's needs in the following areas:

Academic: has difficulty retaining certain things, tends  
to rush or over think answer

Social/Behavioral: get frustrated easily and becomes upset

4. Other information I would like to share with the Multidisciplinary Team:

I do not wish to provide any input at this time.

Date

Phone (home)

Phone (work)

Guardian/Surrogate signature

Address:

Colonial SD  
230 Flourtown Road  
Plymouth Meeting, PA 19462  
Phone: 610-834-1670

## REEVALUATION REPORT (RR)

\*\*\*\*\*School Age

### DEMOGRAPHICS

Student's Name: EI D: Date of Report: 8/7/2007  
Local Education Agency: Colonial  
School Child is Attending: Plymouth Elementary School  
Student Birth Date: Grade: Kindergarten  
Parent Name: (  
Address:

#### Current Educational Program:

Regular Education with Speech and Language Support

#### Other Demographic Data, As Needed:

Home Phone Number: 484-231-1818;  
Mother Cell Phone Number: 484-919-3980

#### Date IEP Team Reviewed Existing Evaluation Data:

### SUMMARIZE INFORMATION REVIEWED

- Existing evaluation data (including physical, social, or cultural background and related developmental needs):

E is a six year old student who recently completed kindergarten at Plymouth Elementary School. E is an only child. She lives at home with her mother, father, and grandmother. English is the language that is spoken at home. E's mother is in food service and her father is in sales. No history of learning disabilities or ADHD was noted in E's family.

E was born, one week past her due date, via cesarean section. She was weighed seven pounds, eleven ounces at birth. Emotional upset during pregnancy was noted as Mrs. Divinney lost her mother while pregnant with E. E stood alone at the age of one year and she began walking at the age of fourteen months. E spoke her first words at ten months of age and she began speaking in sentences when she was two years old. Difficulty talking was noted and E had trouble pronouncing words and letters. No history of hospitalizations or operations was noted and E is not currently taking any medication. E passed her school hearing screening in September 2006. She failed her vision screening in November 2006 and a referral for a vision exam was sent home. Mrs. D: reported that she had taken E to the pediatrician and

that the results of the pediatrician's vision exam did not indicate any vision difficulties.

E. attended three years of nursery school prior to kindergarten and she entered kindergarten at the age of five. During her kindergarten year, E.'s teacher became concerned about her academic progress she referred E. to the Student Support Team (SST). Her teacher, Mrs. Kelley, reported that E. could not write letters of the alphabet and that she had trouble writing her name. In the area of math, Elizabeth was reported to have trouble recognizing and writing numbers and she had difficulty with one-to-one number correspondence. Behaviorally, difficulty beginning tasks, remaining on task and completing tasks was noted and E. demonstrated immature behaviors in comparison to her peers (i.e., baby talk). An SST meeting was held on November 9th, 2006, and action plans included having E. copy letters and having Elizabeth dictate a story about a picture while an adult wrote what she said. A speech and language screening was also recommended. Following the speech and language screening, a speech and language evaluation was conducted and Elizabeth was deemed eligible to receive speech and language services. At a follow up SST meeting, held in March 2007, academic concerns were still noted and E. was referred for a multidisciplinary evaluation to obtain more information.

• Evaluations and information provided by the parents:

E.'s mother provided information via a parent input form and a developmental history form. Mrs. D. described E. to be a kind, loving, and happy young girl who possesses a good sense of humor and a good memory. Mrs. D. indicated that E. enjoys her classmates, maintains her friendships, and considers all of her classmates to be her friend. Mrs. D. commented that Elizabeth occasionally seems 'not as mature' as her classmates. According to Mrs. D., E. is easily distracted and she has a short attention span. Other behavioral characteristics noted included stubbornness and temper tantrums and Mrs. D. commented that Elizabeth does not always respond well to authority.

Mrs. D. reported concern regarding E.'s 'difficulty concentrating' as well as her lack of progression compared to the children her age. Mrs. D. explained that E. 'has difficulty retaining certain things' and that she 'tends to rush or over think her answers.' Mrs. D. also mentioned that E. 'can get frustrated easily and become upset.' Despite this, Mrs. D. noted that Elizabeth enjoys being in the classroom and that she 'loves to learn in that setting.' Mrs. D. believes that Elizabeth has come 'a long way since September.' She indicated that E. 'knows her numbers' and that she is able to 'write her name and read some sight words.'

• Current classroom based assessments and observations and local and/or state assessments and Observations by teachers and related service providers:

E. participated in a full-day kindergarten program during

the 2006-2007 school year and she was educated in the general education curriculum for all academic areas. Elizabeth received speech and language services six times per month in a small group from March 2007 until the end of the school year.

On the first Dynamic Indicators of Basic Emerging Literacy (DIBELS) test, administered in the fall of her kindergarten year (September 2006), E was found to be at some-risk for letter naming fluency and at low risk in the area of initial sound fluency. On the second DIBELS test, administered in January 2007, E was emerging in the area of initial sound fluency and she was at low risk for letter naming fluency. She was at risk for phoneme segmentation fluency and nonsense word fluency. On the spring DIBELS assessment (5/31/07), E was at low risk for nonsense word fluency and at some risk for letter naming fluency. She was deficient in the area of phoneme segmentation fluency.

E was assessed to be at a reading level 0 on the beginning and middle of the year reading assessment. At the end of the year, E continued to be instructional at a Rigby reading level of 0 which is considered not proficient for the end of kindergarten. E's teacher, Mrs. Kelley, observed that Elizabeth knows a 'few sight words' but that she 'uses them only in writing.' Mrs. Kelley noted that E is 'still unable to distinguish between a letter, word, or sentence' and that she 'is not able to track print.' In the area of reading comprehension, Mrs. Kelley reported that E is 'able to recall some details of a story' but that she is 'inconsistent when asked to recall characters and setting.'

In the area of writing, E received a score of 0 on the beginning of the year dictated sentence, which was considered not proficient. Her score of 13 on the mid-year dictated sentence assessment was partially proficient. E's score of 17 on the end of the year kindergarten dictated sentence is considered not proficient. Mrs. Kelley reported that E was generally 'only writing a phrase or one sentence' toward the end of the year. Mrs. Kelley explained that E 'will usually write the same sentence in her journal 5-10 times before coming up with a new idea' and Mrs. Kelley mentioned that the new idea was often 'teacher directed.' Mrs. Kelley believes that E 'needs one-on-one support to help put her thoughts into a sentence' as well as one-on-one support to put 'that sentence in writing.' Mrs. Kelley explained that she would help Elizabeth by drawing lines for each word that E stated and then E was able to complete her sentence by filling in the words.

On the first math benchmark (11/13/06), E's score of 39% was considered below basic (student average=77%). She was below basic in areas such as writing numbers up to 20, identifying whole number quantities from least to greatest, and identifying patterns. On the second math benchmark (2/20/07), E's

score of 33% was also considered below basic (student average=91%). On this subtest, E. was proficient in writing numbers up to 20, but she was below basic in the areas of identifying numbers, describing objects in space by position (i.e., above), and recognizing patterns. E.'s score of 41% was also below basic on the third math benchmark, which was administered in May of 2007 (student average=92%). She was advanced in telling time but below basic in recognizing patterns, answering questions based on graph data, and identifying the value of a penny. In the area of math, Mrs. Kelley observed that Elizabeth is able to count and identify most numbers to 20 but her 'one-to-one correspondence is not evident.' According to Mrs. Kelley, E. is able to tell time to the hour, but she is unable to measure with nonstandard units. Mrs. Kelley also noted that E. 'has difficulty using vocabulary to describe things (i.e., shorter/longer, etc.)' Mrs. Kelley believes that Elizabeth has trouble using vocabulary to describe information on a graph and that she has trouble identifying and describing the shapes used in kindergarten. Mrs. Kelly also feels that Elizabeth needs help applying math strategies and 'carrying them out.'

Mrs. Kelley described Elizabeth to be a 'sweet and loving' girl who 'is helpful and willing to work with others.' Mrs. Kelley explained that E. is always willing to help others and that she enjoys 'cooperative learning activities.' Additionally, Elizabeth is 'loving and affectionate to adults in school' and she often 'offers hugs to adults and her classmates.' Socially, Mrs. Kelley observed that Elizabeth enjoys talking to her friends at her table.

Mrs. Kelley reported that E. has difficulty beginning tasks, remaining on task, and completing tasks within a given time period. She explained that E. 'is often distracted from her work by those around her' and that she 'will sometimes rush to complete work or need one-on-one support to say on task.' In class, E. has increased her participation 'tremendously' since September, but she displays difficulty following verbal directions. Academically, Mrs. Kelley reported that E. 'recognizes all letters and letter sounds but that she is 'unable to write all the letters.' She has trouble with 'handwriting as well as cutting activities.' Instructional strategies implemented and noted to be successful include one-on-one work with her teacher, progress monitoring, and working with older students.

#### Speech and Language Therapist Input:

Elizabeth was referred for a speech and language screening by her teacher, Tricia Kelley, due to concerns about her academic progress. The results of the screening indicated that Elizabeth has difficulty understanding questions about stories, difficulty retelling stories, and difficulty comprehending basic concepts. A full evaluation was conducted by speech and language therapist Susan Dryburgh to determine Elizabeth's eligibility and

need for speech and language support. Mrs. Dryburgh reported the following in E s evaluation report (2/13/07):

'Two measures of receptive and expressive language ability were administered to E on February 12, 2007. The Clinical Evaluation of Language Fundamentals-Preschool (CELF-P) assesses the ability of children who are 3.0 to 6.11 years of age. All subtests are presented with picture cues. Elizabeth's scores were as follows:

Subtest	Standard Score	Percentile Rank
Linguistic Concepts	5	5
Basic Concepts	4	2
Sentence Structure	5	5
Receptive Language Score	71	3
Recalling Sentences in Context	5	5
Formulating Labels	7	16
Word Structure	3	1
Expressive Language Score	77	6
Total Language Score	72	3

E s scores on the CELF-P are below average for a child her age. Her strength was in being able to give labels for pictures. Elizabeth had difficulty understanding the concepts of "first", "last", "before", "after", "same" and "different". She also made errors in following directions that contained more than two elements.

The Test of Narrative Language measures a student's ability to retell stories from memory, to create narratives from picture cues and to recall information from stories presented with and without picture cues. E obtained a standard score of 6 (9th percentile) on the Narrative Comprehension subtest and a standard score of 4 (2nd percentile) on the Oral Narration subtest. Her Narrative Language Ability Index standard score was 70 (2nd percentile). E was unable to identify the problem in a story that was read to her. When she was presented with a series of pictures, she did not connect the events into a story, but simply gave a list of the activities in each picture. Grammatical errors were noted in several of Elizabeth's responses ("The dog said, 'no go.'" and "he step on a rock"). These omissions of grammatical morphemes (endings) were also noted on the Recalling Sentences in Context subtest of the CELF-P.'

Mrs. Dryburgh reported 'the results of formal measures of receptive and expressive language indicate that (Elizabeth) has significant needs in being able to comprehend directions and stories. E had difficulty following directions containing basic concepts related to time and sequence. She also

demonstrated difficulty in being able to retell stories and to create narratives. These needs will affect her ability to follow directions in the classroom, to participate in classroom discussions and to make progress in the writing curriculum.' As a result of the evaluation, E. was deemed eligible for speech and language support services as a student with a speech and language impairment. It was recommended that the IEP team develop a plan to address Elizabeth's receptive and expressive language needs.

E. began receiving speech and language therapy services in March 2007. She received speech and language therapy for thirty minute sessions, six times a month, in a small group. Mrs. Dryburgh provided the following observations: 'In therapy sessions, E. is usually attentive although she may initially need reminders that it is time to attend to a structured task. She readily cooperates with all activities and takes turns in games. E. is able to relate personal experiences with a topic sentence, but usually requires prompting to add details. She is able to answer factual questions about stories with up to 60% accuracy when picture cues are present. Elizabeth is able to tell the beginning of a story from picture cues, but needs additional prompting to tell the middle and the end. Elizabeth imitates models of correct grammatical forms (-s, -ing) and some carryover has been noted in her conversational speech.'

#### Reading Specialist Input:

During her kindergarten year, Elizabeth worked with reading specialist Janette Hornick, two times a week in a whole group setting for shared reading and writing workshop. Ms. Hornick observed that E. 'struggles greatly to form her letters correctly and write words.' According to Ms. Hornick, E. 'is confident with writing a few letters (i.e., e) and a few sight words, (i.e., the).'

- Whether any additions or modifications to the special education and related services are needed to enable the child to meet the measurable annual goals in the IEP and to participate as appropriate in the general education curriculum:

Recommendations regarding E. 's program will be held off until additional data is collected.

#### **For a child suspected of having a specific learning disability, include a statement of:**

1. whether the child has a specific learning disability;  
N/A
2. the basis for making the determination (whether there is a severe discrepancy between achievement and ability that is not correctable without special education and related services or whether the child does not respond to research-based interventions or other);  
N/A
3. the relevant behavior noted during the observation of the child;  
N/A
4. the relationship of that behavior to the child's academic functioning;  
N/A

**5. the educationally relevant medical findings, if any;**

N/A

**5. the determination of the team concerning the effects of environmental, cultural, or economic disadvantage**

N/A

**DETERMINATION OF NEED FOR ADDITIONAL DATA**

☐ The IEP Team determined that additional data are not required.

Reason(s) additional data are not required:

**OR**

☒ The IEP Team determined that there is a need for additional data. The LEA shall issue the Permission to Reevaluate and administer tests and other evaluation materials as may be needed to produce the following data:

Observations, Behavior Rating Scales, Cognitive Assessment, Academic Assessment, Review of Records, Review of Classroom Academic Data.

**SUMMARY OF FINDINGS/INTERPRETATION OF ADDITIONAL DATA:**

**Classroom Observation:**

E was observed in her classroom on May 14th 2007 by the compiler of this report. Students were working in centers and Elizabeth was stationed at a 'nonsense word' table with two other female students. The students at this center were to roll three letter dice, put them together, write the displayed letters on a sheet, and read the nonsense word the letters made. When the examiner walked by E's table, El began speaking to the examiner (she showed the evaluator her pants and her shoes). The examiner redirected Elizabeth back to her work and Elizabeth began socializing with the other students (who had been focused on their task). The observer suggested that El engage in the task and Elizabeth said 'ok.' Elizabeth rolled her letter dice and wrote the letters displayed (SaN) on her sheet. She then asked the observer, 'What does this say? I can't read.' The observer encouraged Elizabeth to try, and El asked the girl seated next to her 'what does this say?' The girl responded and E rolled her dice again. She rolled SEF and asked 'What does this say?' E was encouraged by the evaluator to read one letter at a time, but, instead of trying, Elizabeth rolled the dice again. She wrote the displayed letters (NZA) and asked a girl seated next to her 'What does this say?' When the girl did not respond, Elizabeth repeatedly stated the girl's name and the question 'What does this say?' She tapped the girl on the shoulder as she did this. The girl rearranged the letters from NZA to NAZ and told Elizabeth 'it's supposed to be consonant-vowel-consonant.' El rolled her dice again. After rolling FZA, E stated her name and asked her 'what does this say?' The girl responded 'Stop Elizabeth. I'm trying to work.' She then rearranged Elizabeth's letters to FAZ and told her 'it's supposed to be this way and it says .'. The girl then got up to get a drink of water. Elizabeth allowed this girl to the water fountain and got a drink of water as well. When the two girls were seated, El rolled FPA and asked

her neighbor (the same girl) 'what does this say?' The girl rearranged the blocks to FAP and replied 'fap.'

At this point, the observer suggested that E try to read the sounds. E rolled PEP and the observer told her to try and sound it out. Elizabeth stated the letter names 'P-E-P.' The observer asked Elizabeth, 'What sound does P make?' and Elizabeth correctly replied 'puh'. When the E was asked what sound does 'e' make, Elizabeth did not respond. The observer told Elizabeth the 'eee' sound and then suggested that E put the sounds together. Elizabeth proceeded to say each sound individually, 'Puh... EEEE... Puh.' She had difficulty trying to put the sounds together to make a nonsense word. E continued to roll the dice and, as she rolled different letters, she needed constant reminders to put the blue letter (the vowel) in the middle of the two white letters (the consonants.). After about four rolls, Elizabeth started speaking socially with the other two girls about an unrelated topic (going to the park.)

#### Behavior Rating Scales:

Behavior Assessment System for Children - Second Edition (BASC-II):

Mrs. Kelley and Mrs. D completed the Behavior Assessment System for Children - Second Edition (BASC-II) in order to yield current behavioral data. The BASC-II measures adaptive and problem behaviors in the home and school environments. Ratings of E's behavior were compared to those received by a national sample of students approximately the same age. Scores that fall within the average range (T-scores 59 and lower) indicate that the raters do not view any concern in that area. Scores that fall within the at-risk range (T-scores 60-69) indicate a moderate concern, but do not reflect enough concern to warrant a formal diagnosis. Scores that fall within the clinically significant range (T-scores above 69) reveal behavioral concerns that warrant intervention. This scale yields scores for an Externalizing Problem Composite, an Internalizing Problem Composite, a Behavioral Symptoms Index, and an Adaptive Skills Composite.

In the areas of externalizing behaviors, both raters placed E within the average range for aggression. This information suggests that Elizabeth does not display aggressive or hyperactive behaviors to a significant degree at home or at school. While ratings by Mrs. Kelley also placed E in the average range for hyperactivity, parent ratings placed E in the at-risk range. Mrs. Divinney reported that Elizabeth 'almost always' interrupts others when they are speaking and Mrs. Kelley has 'sometimes' observed this behavior. Mrs. Divinney also indicated that E often fiddles with things while at meals and Mrs. Kelley reported that E 'sometimes' has trouble staying seated.

#### Regular Education Teacher T-Score

Externalizing Problems	48 (Average)
Hyperactivity	52 (Average)
Aggression	44 (Average)

Parent T-

## Score

Externalizing Problems	59 (Average)
Hyperactivity	64 (At-Risk)
Aggression	52 (Average)

Internalizing problem behaviors are not typically disruptive to others. The BASC explores internalizing behaviors related to anxiety, depression, and somatization (complaining of physical symptoms for which no medical basis can be found). Elizabeth's teacher did not report any concern and her ratings of Elizabeth fell within the average range for all areas. This information suggests that Elizabeth does not display characteristics of anxiety and/or depression to a significant degree at school. Ratings by Mrs. Divinney also placed Elizabeth in the average range for Somatization; however, her ratings placed Elizabeth in the at-risk range for anxiety and depression. In the area of depression, Mrs. Divinney reported that Elizabeth 'often' pouts, 'often' cries easily, and that she 'often' is easily frustrated. Mrs. Kelley reported that Elizabeth is 'sometimes' easily frustrated and she has 'never' observed Elizabeth to pout or cry easily. With regard to anxiety, Mrs. Divinney reported that Elizabeth 'sometimes' worries and that she 'sometimes' is nervous. Mrs. Kelly has 'never' observed these behaviors.

## Regular Education Teacher T-Score

Internalizing Problems	41 (Average)
Anxiety	39 (Average)
Depression	45 (Average)
Somatization	44 (Average)

## Parent T-Score

Internalizing Problems	59 (Average)
Anxiety	60 (At-Risk)
Depression	65 (At-Risk)
Somatization	45 (Average)

Other clinical scales include atypicality, withdrawal, and attention problems. Both raters placed Elizabeth in the average range for atypicality and they noted that Elizabeth 'never' seems unaware of others. Ratings for withdrawal and attention problems differed with parent ratings falling within the at-risk range and teacher ratings falling in the average range. With regard to withdrawal, both raters noted that Elizabeth 'sometimes' has trouble making new friends. Mrs. Divinney reported that Elizabeth 'sometimes' avoids other children but Mrs. Kelley has 'never' observed these behaviors. Mrs. Divinney also indicated that Elizabeth 'often' clings to parents in strange surroundings. In the area of attention problems, Mrs. Divinney reported that Elizabeth is 'often' easily distracted, 'sometimes' listens carefully, 'sometimes' pays attention and 'sometimes' listen to directions. Mrs. Kelley has also 'often' observed Elizabeth to be easily distracted and to 'sometimes' listen carefully. She noted, however that Elizabeth 'often' pays attention and 'often' listens to directions.

## Regular Education Teacher T-Scores

Attention Problems	55 (Average)
Atypicality	46 (Average)
Withdrawal	48 (Average)

## Parent T-Scores

Attention Problems	63 (At-Risk)
Atypicality	46 (Average)
Withdrawal	61 (At-Risk)

The BASC-2 also provides a measure of adaptive skills, which are the skills that assist in functional performance at home and school. Scores that fall within the average range ( $T > 40$ ) reveal age appropriate skills. Scores that fall between 40 and 31 are considered at risk, and scores 30 and below are considered clinically significant. In the area of adaptive skills, Elizabeth was rated by her mother to be in the average range for social skills, activities of daily living, and functional communication. While Mrs. Kelley also rated Elizabeth in the average range for social skills, her ratings placed Elizabeth in the at-risk range for Functional Communication. Mrs. Kelley reported that Elizabeth 'often' is unclear when presenting ideas and that she 'never' provides her telephone number or home address when asked. While ratings by Mrs. Kelley placed Elizabeth in the average range for adaptability, ratings by Mrs. Divinney fell in upper end of the at-risk range for this area and she noted that Elizabeth is 'sometimes' easily soothed when angry.

## Regular Education Teacher T-Scores

Adaptive Skills	55 (Average)
Adaptability	55 (Average)
Social Skills	70 (Average)
Functional Communication	39 (At-Risk)

## Parent T-Scores

Adaptive Skills	42 (Average)
Adaptability	39 (At-Risk)
Social Skills	45 (Average)
Activities of Daily Living	41 (Average)
Functional Communication	50 (Average)

## Conners Rating Scale:

Mrs. Divinney and Mrs. Kelley also completed parent and teacher versions of the Conners' Rating Scales (Revised) in order to obtain more information about Elizabeth's inattentive and hyperactive behaviors. The Conners is a rating scale that identifies behaviors that are commonly associated with Attention Deficit Hyperactivity Disorder (ADHD). Scores that fall between 56 and 60 are considered Slightly Atypical and concern should be noted. Scores that fall between 61 and 65 are considered Mildly Atypical and indicate a possible significant problem. Scores that fall between 66 and 70 are considered Moderately Atypical and scores that fall above 70 are Markedly Atypical. Areas with scores that fall within the moderately and Markedly Atypical ranges indicate significant problems and suggest

further exploration.

Mrs. Kelley's ratings placed the oppositional subscale within the average range indicating that Elizabeth does not display oppositional behaviors in the classroom. Mrs. Divinney's ratings placed the oppositional subscale in the markedly atypical range and she reported that Elizabeth 'often' loses her temper. Mrs. Kelley's ratings placed the cognitive problems/inattention scale in the markedly atypical range indicating significant concern in this area. Specifically, Mrs. Kelley indicated that Elizabeth 'often' forgets things she has learned, that she 'very often' is poor in spelling, that she 'very often' is not reading up to par and that she 'very often' is poor in arithmetic. Mrs. Divinney's ratings also placed the cognitive problems/inattention scale in the markedly atypical range. Mrs. Divinney reported that Elizabeth 'often' has difficulty doing homework and that she 'often' fails to finish school work or chores. Mrs. Divinney also indicated that Elizabeth 'often' needs close supervision to get through assignments and that she 'often' fails to complete assignments. Parent and teacher ratings fell in the markedly and moderately atypical range for hyperactivity. Both raters reported that Elizabeth 'occasionally' fidgets with her hands or feet and that she 'occasionally' is restless in the squirmy sense. Ratings by Mrs. Divinney and Mrs. Kelley placed the Conners' ADHD Index in the markedly atypical range suggesting a significant problem in this area.

#### Parent Ratings:

Scale	Score/Range
Cognitive Problems/ Inattention	89/Markedly Atypical
Hyperactivity	76/Markedly Atypical
Oppositional	70/Markedly Atypical
Conners ADHD Index	79/Markedly Atypical

#### Teacher Rating:

Scale	Score/Range
Cognitive Problems/ Inattention	>90/Markedly Atypical
Hyperactivity	67/Moderately Atypical
Oppositional	46/Average
Conners ADHD Index	76/Markedly Atypical

#### Testing Observations:

Testing for this evaluation was conducted over the summer and Elizabeth came to testing sessions with her mother. Elizabeth presents as a sweet and outgoing young girl. She readily engaged in informal conversation with the evaluator and she appeared to enjoy showing the evaluator and her mother different places in the school. During testing, Elizabeth seemed to have some difficulty understanding instructions and, when appropriate, directions were restated several times in order to ameliorate Elizabeth's comprehension of task requirements. Throughout the evaluation, Elizabeth appeared to have difficulty sustaining her attention to tasks. She seemed to have trouble sitting still for extended time periods and she would fidget,

move around, and/or get up out of her seat while she answered questions. Elizabeth appeared to become frustrated when she was presented with items she found challenging. On these occasions, she could request to leave to 'go see mommy' or she would answer impulsively. On one occasion, she walked to the door and requested to finish testing ('i.e., 'I go home.') Verbal praise and tangible rewards (i.e., flowers, candy) were also used to encourage her motivation and persistence to tasks.

Although frequent breaks were taken in order to maintain Elizabeth's level of motivation and focus to tasks, it is possible that her limited attention and/or her receptive/expressive language difficulties interfered with her performance on some tasks. The following assessment results should be interpreted with these cautions in mind.

#### Cognitive Assessment

Wechsler Preschool and Primary Scale of Intelligence - Third Edition (WPPSI-III):

Elizabeth was administered the Wechsler Preschool and Primary Scale of Intelligence - Third Edition (WPPSI-III) in July 2007 in order to obtain an estimate of her cognitive abilities. Elizabeth's performance was compared to that of a large group of children of similar age from across the country. Her scores were derived by comparing the number of items that she completed correctly on each subtest to that of a reference group based upon her chronological age of six years old. The results of the WPPSI-III reflect a complex combination of Elizabeth's general learning ability, the effects of prior learning experiences, and developmental trends.

The WPPSI-III is organized into two scales; Verbal and Performance. The Full Scale IQ score of the WPPSI-III is comprised of three core verbal and performance subtests and Coding; a Processing Speed subtest. Compared to same-aged children in a national sample, Elizabeth's overall thinking and reasoning abilities fell within the Moderately Below Average range and at the 7th percentile (Full Scale IQ score of 78). Elizabeth's difficulties sustaining attention and her difficulties associated with speech and language may have impacted her performance on these subtests. Therefore, her score may be considered an underestimate of her abilities at this time.

On the 3 Verbal subtests of the WPPSI-III, Elizabeth was required to demonstrate general knowledge, verbal concepts and verbal reasoning skills. Elizabeth was required to listen to verbally presented material and express her answers orally. Elizabeth's Verbal IQ score of 83 falls within the Low Average range and at the 13th percentile. An area of relative strength was identified with regard to her general fund of knowledge and her score fell in the average range. Her ability to reason with words, when given verbal clues, was an area of relative weakness and her score fell within the moderately below average range. At times, on this subtest, Elizabeth would answer a question by stating an object that was mentioned in the clue, rather than the object the clue was referring to. Elizabeth's ability to define words fell within the low average range. On this subtest,

Elizabeth was able to identify and describe items such a 'dog' and 'letter.'

On the 3 Performance Subtests, Elizabeth was asked to reason and solve problems using visual images and nonverbal skills rather than verbal skills. The ability to analyze and synthesize abstract visual stimuli, visual information processing, and abstract reasoning skills are all addressed in this domain. On the performance subtests, Elizabeth's skills fell within the moderately below average range and at the 5th percentile (Performance IQ = 75). Elizabeth performed in the moderately below average range on all tasks in this area. On a task, which required her to replicate block designs that were modeled for her or shown to her in pictures, Elizabeth was able to copy patterns using blocks that were red or white. She had more difficulty when she was required to use blocks that had both colors on them. The Picture Concepts subtest required Elizabeth to visually scan pictures and choose which ones related conceptually. This subtest requires the child reason abstractly as well as label, categorize, and compare each pictured object. When presented with an item that she was unable to immediately obtain an answer for, Elizabeth would quickly point to two objects, rather than take time to explore her options. She would continue to point to the same two items, even when she was encouraged to take her time to consider all the options. Elizabeth's performance was also in the moderately below average range on a task which required her to demonstrate nonverbal reasoning skills to identify which picture should come next in a given pattern. Elizabeth approached challenging items on this subtest in a similar impulsive manner as she seemed to guess without taking time to explore all options.

The Coding and Symbol Search subtests were administered as measures of processing speed. An area of relative strength was revealed on a timed subtest that required Elizabeth to reproduce a visual code using a paper and pencil and her score on this subtest (Coding) fell within the average range. Her performance fell in the low average range on a subtest that required Elizabeth to visually scan and match shapes (Symbol Search). Elizabeth had difficulty sustaining her attention throughout the course of this task.

Elizabeth was also administered subtests of receptive language and expressive vocabulary which comprise a General Language Composite. An area of relative strength was noted in the area of Receptive Vocabulary and her score fell in the average range. On this subtest, Elizabeth was able to point to pictures of a desert, vacuum cleaner, bulldozer, and cash register. She was also able to point to pictures describing the actions of kicking, carrying, balancing and raining. On a subtest of Picture Naming, Elizabeth was able to verbally identify pictures of a guitar, shell and kangaroo. She incorrectly responded that a rhinoceros was a zebra and that a rake was a mop. Her score fell in the moderately below average range for this subtest.

Standard scores on this measure have a mean of 100, standard deviation 15 (scores between 90 and 109 are considered to fall within the average range). Scaled scores have a mean of 10 and a standard deviation of 3 (scores that fall between 8 and 12 are considered